

PHA 5-Year and Annual Plan	U.S. Department of Housing and Urban Development Office of Public and Indian Housing	OMB No. 2577-0226 Expires 4/30/2011																										
1.0	PHA Information PHA Name: <u>WISTER HOUSING AUTHORITY</u> PHA Code: <u>OK087</u> PHA Type: <input checked="" type="checkbox"/> Small <input type="checkbox"/> High Performing <input type="checkbox"/> Standard <input type="checkbox"/> HCV (Section 8) PHA Fiscal Year Beginning: (MM/YYYY): <u>7/2010</u>																											
2.0	Inventory (based on ACC units at time of FY beginning in 1.0 above) Number of PH units: <u>36</u> Number of HCV units: <u>0</u>																											
3.0	Submission Type <input checked="" type="checkbox"/> 5-Year and Annual Plan <input type="checkbox"/> Annual Plan Only <input type="checkbox"/> 5-Year Plan Only																											
4.0	PHA Consortia <input type="checkbox"/> PHA Consortia: (Check box if submitting a joint Plan and complete table below.)																											
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th rowspan="2" style="width: 30%;">Participating PHAs</th> <th rowspan="2" style="width: 10%;">PHA Code</th> <th rowspan="2" style="width: 20%;">Program(s) Included in the Consortia</th> <th rowspan="2" style="width: 20%;">Programs Not in the Consortia</th> <th colspan="2" style="width: 20%;">No. of Units in Each Program</th> </tr> <tr> <th style="width: 10%;">PH</th> <th style="width: 10%;">HCV</th> </tr> <tr> <td>PHA 1:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 2:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>PHA 3:</td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>	Participating PHAs	PHA Code	Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program		PH	HCV	PHA 1:						PHA 2:						PHA 3:						
Participating PHAs	PHA Code					Program(s) Included in the Consortia	Programs Not in the Consortia	No. of Units in Each Program																				
		PH	HCV																									
PHA 1:																												
PHA 2:																												
PHA 3:																												
5.0	5-Year Plan. Complete items 5.1 and 5.2 only at 5-Year Plan update.																											
5.1	Mission. State the PHA's Mission for serving the needs of low-income, very low-income, and extremely low income families in the PHA's jurisdiction for the next five years: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.																											
5.2	Goals and Objectives. Identify the PHA's quantifiable goals and objectives that will enable the PHA to serve the needs of low-income and very low-income, and extremely low-income families for the next five years. Include a report on the progress the PHA has made in meeting the goals and objectives described in the previous 5-Year Plan. <u>Goals and Objectives</u> Increase the availability of decent, safe, and affordable housing: Expand the supply of assisted housing: Reduce public housing vacancies; Leverage private or other public funds to create additional housing opportunities. Improve the quality of assisted housing: Improve PHAS score, increase customer satisfaction, concentrate on efforts to improve specific management functions, and renovate or modernize public housing units Improve community quality of life and economic vitality: Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments; Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments; and, Implement public housing security improvements Promote self-sufficiency and asset development of families and individuals: Promote self-sufficiency and asset development of assisted households: Increase the number and percentage of employed persons in assisted families; Provide or attract supportive services to improve assistance recipients' employability; Provide or attract supportive services to increase independence for the elderly or families with disabilities. Ensure Equal Opportunity in Housing for all Americans: Ensure Equal Opportunity and affirmatively further fair housing: Undertake affirmative measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and disability; Undertake affirmative measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and disability; and, Undertake affirmative measures to ensure accessible housing to persons with all varieties of disabilities regardless of unit size required <u>Report on Progress:</u> <ul style="list-style-type: none"> • Maintained 98-100% occupancy • Utilized Capital Fund Program for improvements to maintain dwelling units • Attended HUD offered training • Continued upgrade of technical systems • Increased financial stability • Improved PHAS score • Maintain policies of: Buy American Polity, Violence Against Women Policy, Section 3 Policy 																											

6.0	PHA Plan Update (a) Identify all PHA Plan elements that have been revised by the PHA since its last Annual Plan submission: No revisions (b) Identify the specific location(s) where the public may obtain copies of the 5-Year and Annual PHA Plan. For a complete list of PHA Plan elements, see Section 6.0 of the instructions. Copies of PHA Plans can be seen at Wister Housing Authority, 702 Senior Drive., Wister, OK 74966
7.0	Hope VI, Mixed Finance Modernization or Development, Demolition and/or Disposition, Conversion of Public Housing, Homeownership Programs, and Project-based Vouchers. <i>Include statements related to these programs as applicable.</i> N/A
8.0	Capital Improvements. Please complete Parts 8.1 through 8.3, as applicable.
8.1	Capital Fund Program Annual Statement/Performance and Evaluation Report. As part of the PHA 5-Year and Annual Plan, annually complete and submit the <i>Capital Fund Program Annual Statement/Performance and Evaluation Report</i> , form HUD-50075.1, for each current and open CFP grant and CFFP financing. Form HUD-50075.1 is included in this submission
8.2	Capital Fund Program Five-Year Action Plan. As part of the submission of the Annual Plan, PHAs must complete and submit the <i>Capital Fund Program Five-Year Action Plan</i> , form HUD-50075.2, and subsequent annual updates (on a rolling basis, e.g., drop current year, and add latest year for a five year period). Large capital items must be included in the Five-Year Action Plan. Form HUD-50075.2 is included in this submission
8.3	Capital Fund Financing Program (CFFP). <input type="checkbox"/> Check if the PHA proposes to use any portion of its Capital Fund Program (CFP)/Replacement Housing Factor (RHF) to repay debt incurred to finance capital improvements.
9.0	Housing Needs. Based on information provided by the applicable Consolidated Plan, information provided by HUD, and other generally available data, make a reasonable effort to identify the housing needs of the low-income, very low-income, and extremely low-income families who reside in the jurisdiction served by the PHA, including elderly families, families with disabilities, and households of various races and ethnic groups, and other families who are on the public housing and Section 8 tenant-based assistance waiting lists. The identification of housing needs must address issues of affordability, supply, quality, accessibility, size of units, and location. No current information is available on affordability, supply, quality, accessibility, size of units, and location according to the US Census CHAS except the same information that was reported in the year 2000. Wister Housing Authority as of December 31, 2009 has 11 people on the waiting list and is broken down as follows: 1 White, disabled man, low-income individual needing a 1-bedroom unit. 1 White, elderly disabled man, low-income individual needing a 1-bedroom unit. 1 White, elderly women, low income individual needing a 1-Bedroom unit. 2 White, elderly men, low income individual needing a 2-bedroom unit. 4 White, single women, low income family needing a 2-bedroom unit. 6 White, family, low income needing a 2-bedroom unit. 1 White, single mother, low income family needing a 3-Bedroom unit. 1 White, family, low income needing a 3-Bedroom unit.

9.1	Strategy for Addressing Housing Needs. Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list in the upcoming year. Note: Small, Section 8 only, and High Performing PHAs complete only for Annual Plan submission with the 5-Year Plan. Need: Shortage of affordable housing for all eligible populations Strategy: Employ effective maintenance and management policies to minimize the number of public housing units off-line, reduce turnover time for vacated public housing units, reduce time to renovate public housing units, and undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required. Influences: Funding and staffing constraints
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10.0	<p>Additional Information. Describe the following, as well as any additional information HUD has requested.</p> <p>(a) Progress in Meeting Mission and Goals. Provide a brief statement of the PHA's progress in meeting the mission and goals described in the 5-Year Plan.</p> <p><u>Report on Progress:</u></p> <ul style="list-style-type: none"> • Answered in 5.2 <p>(b) Significant Amendment and Substantial Deviation/Modification. Provide the PHA's definition of "significant amendment" and "substantial deviation/modification"</p> <p>The Housing Authority of WISTER has defined "Substantial Deviation" and "Significant Amendment or Modification" as they relate to the Agency Plan as follows:</p> <p>"Substantial Deviation(s)" from the 5-year Action Plan shall be explained in the Annual Plan for the period in which they occur and shall include:</p> <ul style="list-style-type: none"> • Any change to rent or admissions policies or organization of the waiting list; • Additions of non-emergency work items (items not included in the current Annual Statement or 5-year Action Plan) or change in use of replacement reserve funds under the Capital Fund; • Additions of new activities not included in the current PHA Plan; and, • Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities. <p>"Significant Amendment or Modification" of the Annual Plan means:</p> <ul style="list-style-type: none"> • Any change to rent or admissions policies or organization of the waiting list; • Additions of non-emergency work items (items not included in the current Annual Statement or 5-year Action Plan) or change in use of replacement reserve funds under the Capital Fund; • Additions of new activities not included in the current PHA Plan; and, • Any change with regard to demolition or disposition, designation, homeownership programs or conversion activities.
11.0	<p>Required Submission for HUD Field Office Review. In addition to the PHA Plan template (HUD-50075), PHAs must submit the following documents. Items (a) through (g) may be submitted with signature by mail or electronically with scanned signatures, but electronic submission is encouraged. Items (h) through (i) must be attached electronically with the PHA Plan. Note: Faxed copies of these documents will not be accepted by the Field Office.</p> <p>(a) Form HUD-50077, PHA Certifications of Compliance with the PHA Plans and Related Regulations (which includes all certifications relating to Civil Rights)</p> <p>(b) Form HUD-50070, Certification for a Drug-Free Workplace (PHAs receiving CFP grants only)</p> <p>(c) Form HUD-50071, Certification of Payments to Influence Federal Transactions (PHAs receiving CFP grants only)</p> <p>(d) Form SF-LLL, Disclosure of Lobbying Activities (PHAs receiving CFP grants only)</p> <p>(e) Form SF-LLL-A, Disclosure of Lobbying Activities Continuation Sheet (PHAs receiving CFP grants only)</p> <p>(f) Resident Advisory Board (RAB) comments. Comments received from the RAB must be submitted by the PHA as an attachment to the PHA Plan. PHAs must also include a narrative describing their analysis of the recommendations and the decisions made on these recommendations.</p> <p>(g) Challenged Elements</p> <p>(h) Form HUD-50075.1, Capital Fund Program Annual Statement/Performance and Evaluation Report (PHAs receiving CFP grants only)</p> <p>(i) Form HUD-50075.2, Capital Fund Program Five-Year Action Plan (PHAs receiving CFP grants only)</p> <p>Item # a,b,c, and d will be signed and sent to the Oklahoma Field Office via US Mail along with a signed copy of Form HUD-50075.1 Original Annual Statement for OK56P11950110. Items f and g do not apply. Items h and I are included in this electronic submission.</p>

Part I: Summary					
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56P08750110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval:	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 20) ³	15,802			
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 20)	4,500			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	500			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	20,000			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	5,000			
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

Part I: Summary					
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56P08750110 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2010 FFY of Grant Approval:	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	45,802			
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	10,000			
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56P08750110 CFFP (Yes/No): Replacement Housing Factor Grant No:				FFY of Grant: 2010 FFY of Grant Approval:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406 A3	LS	15,802				
PHA Wide	Administration	1410 A3	LS	4,500				
OK087000001	Fees and Costs	1430 A8	LS	500				
OK087000001	Replace floor coverings	1460 C3	10 Units	10,000				
OK087000001	Replace main office HVAC	1460 C3	1 Unit	10,000				
OK087000001	Rpl computer, fax, printer	1475 B3	1 Ea	5,000				
				45,802				

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

¹ Obligation and expenditure end dated can only be revised with HUD approval pursuant to Section 9j of the U.S. Housing Act of 1937, as amended

Part I: Summary			OK087			
PHA Name/Number Wister Housing Authority			Locality (City/County & State) Wister, OK		<input type="checkbox"/> Original 5-Year Plan	<input type="checkbox"/> Revision No:
A.	Development Number and Name	Work Statement for Year 1 FFY _2010__	Work Statement for Year 2 FFY __2011__	Work Statement for Year 3 FFY ____2012____	Work Statement for Year 4 FFY ____2013____	Work Statement for Year 5 FFY ____2014____
B.	Physical Improvements Subtotal	Annual Statement			31,802	12,800
C.	Management Improvements					
D.	PHA-Wide Non-dwelling Structures and Equipment					
E.	Administration					
F.	Other					
G.	Operations		45,802	45,802	14,000	33,002
H.	Demolition					
I.	Development					
J.	Capital Fund Financing – Debt Service					
K.	Total CFP Funds		45,802	45,802	45,802	45,802
L.	Total Non-CFP Funds					
M.	Grand Total		45,802	45,802	45,802	45,802

Part II: Supporting Pages – Physical Needs Work Statement(s) Wister Housing Authority OK087						
Work Statement for Year 1 FFY _____	Work Statement for Year 2011 FFY __2011			Work Statement for Year: 2012 FFY __2012		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See						
Annual						
Statement						
	Subtotal of Estimated Cost		\$	Subtotal of Estimated Cost		\$

form **HUD-50075.2** (04/2008)

Part II: Supporting Pages – Management Needs Work Statement(s) Wister Housing Authority OK087						
Work Statement for Year 1 FFY _2009__	Work Statement for Year _2011_ FFY _2011			Work Statement for Year: _2012_ FFY __2012		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	PHA Wide Operations A3	LS	45,802	PHA Wide Operations	LS	45,802
Annual						
Statement						
	Subtotal of Estimated Cost		\$45,802	Subtotal of Estimated Cost		\$45,802

Part II: Supporting Pages – Management Needs Work Statement(s)				Wister Housing Authority OK087		
Work Statement for Year 1 FFY _2009__	Work Statement for Year _2013_ FFY _2013			Work Statement for Year: _2014_ FFY __2014		
	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost	Development Number/Name General Description of Major Work Categories	Quantity	Estimated Cost
See	PHA Wide Operations A3	LS	14,000	PHA Wide Operations A3	LS	33,002
Annual						
Statement						
	Subtotal of Estimated Cost		\$14,000	Subtotal of Estimated Cost		\$33,002

Part I: Summary					
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56P08750109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 20) ³	5,378		5,378	
3	1408 Management Improvements	3,000		3,000	
4	1410 Administration (may not exceed 10% of line 20)	3,000		3,000	
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,500		1,500	
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	26,000		26,000	
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment	7,000		7,000	
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

Part I: Summary					
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56P08750109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost¹	
		Original	Revised²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	45,878		45,878	
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	26,000			
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.
² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.
³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.
⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56P08750109 CFFP (Yes/No): Replacement Housing Factor Grant No:				FFY of Grant: 2009 FFY of Grant Approval:		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
PHA Wide	Operations	1406 A3	LS	5,378		5,378		
PHA Wide	Training	1408 A9	LS	3,000		3,000		
PHA Wide	Administration	1410 A3	LS	3,000		3,000		
OK087000001	Fees and Costs	1430 A8	LS	1,500		1,500		
OK087000001	Replace playground equip	1475 C1		7,000		7,000		
OK087000001	Replace siding	1460 C3		26,000		26,000		
				45,878		45,878		

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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Part I: Summary					
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56S08750109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 ARRA FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations (may not exceed 20% of line 21) ³				
3	1408 Management Improvements				
4	1410 Administration (may not exceed 10% of line 21)				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	59,006		59,006	59,000
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1492 Moving to Work Demonstration				
16	1495.1 Relocation Costs				
17	1499 Development Activities ⁴				

Part I: Summary					
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56S08750109 Replacement Housing Factor Grant No: Date of CFFP:		FFY of Grant: 2009 ARRA FFY of Grant Approval:	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:)					
<input type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost ¹	
		Original	Revised ²	Obligated	Expended
18a	1501 Collateralization or Debt Service paid by the PHA				
18ba	9000 Collateralization or Debt Service paid Via System of Direct Payment				
19	1502 Contingency (may not exceed 8% of line 20)				
20	Amount of Annual Grant:: (sum of lines 2-19)	59,006		59,006	59,006
21	Amount of line 20 Related to LBP Activities				
22	Amount of line 20 Related to Section 504 Activities				
23	Amount of line 20 Related to Security – Soft Costs				
24	Amount of line 20 Related to Security – Hard Costs				
25	Amount of line 20 Related to Energy Conservation Measures	59,006		59,006	59,006
Signature of Executive Director		Date		Signature of Public Housing Director	
				Date	

¹ To be completed for the Performance and Evaluation Report.

² To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

³ PHAs with under 250 units in management may use 100% of CFP Grants for operations.

⁴ RHF funds shall be included here.

Part II: Supporting Pages								
PHA Name: Wister Housing Authority		Grant Type and Number Capital Fund Program Grant No: OK56S08750109 CFFP (Yes/No): Replacement Housing Factor Grant No:				Federal FFY of Grant: 2009 ARRA		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised ¹	Funds Obligated ²	Funds Expended ²	
OK087000001	Replace dwelling unit windows	1460 C3	84	59,006		59,006	59,006	100%
	Total			59,006		59,006	59,006	100%

¹ To be completed for the Performance and Evaluation Report or a Revised Annual Statement.

² To be completed for the Performance and Evaluation Report.

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Part I: Summary					
PHA Name: Housing Authority of the City of Wister			Grant Type and Number Capital Fund Program Grant No: OK56P08750108 Replacement Housing Factor Grant No:		Federal FY of Grant: 2008
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	5,887	26,646	26,646	26,646
3	1408 Management Improvements	2,000	268	268	268
4	1410 Administration	2,000	364	364	364
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,500	0		
8	1440 Site Acquisition				
9	1450 Site Improvement	17,956	0		
10	1460 Dwelling Structures	16,173	4,948	4,948	4,948
11	1465.1 Dwelling Equipment—Nonexpendable	1,100	1,024	1,024	1,024
12	1470 Nondwelling Structures		13,083	13,083	13,083
13	1475 Nondwelling Equipment		283	283	283
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	46,616	46,616	46,616	46,616
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Wister			Grant Type and Number Capital Fund Program Grant No: OK56P08750108 Replacement Housing Factor Grant No:			Federal FY of Grant: 2008		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	A3 1406		5,887	26,646	26,646	26,646	
PHA Wide	Management Improvement	A3 1408		2,000	268	268	268	
PHA Wide	Administration - Salaries	A3 1410		2,000	364	364	364	
PHA Wide	Fees and Costs	A9 1430		1,500	0			
OK087000001	Add 300 ln ft curb	C1 1450	300 ln ft	17,000	0			
OK087000001	Add 2 speed bumps	C1 1450	2	956	0			
OK087000001	Replace unit windows	C3 1460	62	16,173	0			
OK087000001	Purchase Buffer	B3 1465.1	1	900	0			
OK087000001	Purchase Vacuum	B3 1465.1	1	200	0			
OK087000001	Upgrade Community kitchen	C3 1470			13,083	13,083	13,083	
OK087000001	Purchase 2 Refrigerators	B3 1465	2		1,024	1,204	1,024	
OK087000001	Purchase small tools	A7 1475	Misc		283	283	283	
OK087000001	Rpr Unit to include insulation, electrical, countetops, hot water heater, painting.	B3 1460	1 Unit		4,948	4,948	4,948	
				46,616	46,616	46,616	46,616	

[illegible]

Part I: Summary					
PHA Name: Housing Authority of the City of Wister		Grant Type and Number Capital Fund Program Grant No: OK56P08750107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	6,906	15,243	15,243	15,243
3	1408 Management Improvements	3,000	3,242	3,242	3,242
4	1410 Administration	3,000	523	523	523
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,500	0		
8	1440 Site Acquisition				
9	1450 Site Improvement	12,177	6,315	6,315	6,315
10	1460 Dwelling Structures	8,000	7,340	7,340	7,340
11	1465.1 Dwelling Equipment—Nonexpendable	5,000	0		
12	1470 Nondwelling Structures		7,250	7,250	7,250
13	1475 Nondwelling Equipment	7,114	6,784	6,784	6,784
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	46,697	46,697	46,697	46,697
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Wister			Grant Type and Number Capital Fund Program Grant No: OK56P08750107 Replacement Housing Factor Grant No:			Federal FY of Grant: 2007		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	A3 1406		6,906	15,243	15,243	15,243	100%
PHA Wide	Management Training	A9 1408		3,000	3,242	3,242	3,242	100%
PHA Wide	Administration	A3 1410		3,000	523	523	523	100%
PHA Wide	Fees and Costs	A9 1430		1,500	0			
OK087000001	Repair Drainage	B3 1450		12,177	0			
OK087000001	Replace Interior Doors	B3 1460		8,000	0			
OK087000001	Purchase Refrigerators	B3 1465	10	5,000	0			
OK087000001	Purchase filing cabinets	A7 1475	4	2,000	0			
OK087000001	Purchase folding chairs for center	A7 1475	40	1,500	0			
OK087000001	Purchase small tools	A7 1475	Various	3,614	5,985	5,985	5,985	100%
OK087000001	Purchase low speed floor machine	B3 1475	1		799	799	799	100%
OK087000001	Upgrade community kitchen	C3 1470			7,250	7,250	7,250	100%
OK087000001	New driveway to maint shop	C3 1450			6,315	6,315	6,315	100%
OK087000001	Unit repair to include sewer, a/c, toilet, sheetrock/texture	C3 1460	1 Unit		7,340	7,340	7,340	100%
				46,697	46,697	46,697	46,697	100%

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Part I: Summary					
PHA Name: Housing Authority of the City of Wister			Grant Type and Number Capital Fund Program Grant No: OK56P08750106 Replacement Housing Factor Grant No:		Federal FY of Grant: 2006
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	4,531	29,535	29,535	29,535
3	1408 Management Improvements	2,000	0		
4	1410 Administration	2,000	0		
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,500	0		
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	32,650	15,990	15,990	15,990
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	4,000	1,156	1,156	1,156
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	46,681	46,681	46,681	46,681
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

PHA Name: Housing Authority of the City of Wister		Grant Type and Number Capital Fund Program Grant No: OK56P08750106 Replacement Housing Factor Grant No:					Federal FY of Grant: 2006		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work	
				Original	Revised	Funds Obligated	Funds Expended		
PHA Wide	Operations: Reserves	A3 1406		4,531	29,535	29,535	29,535	100%	
PHA Wide	Attend Training Courses	A3 1408		2,000	0				
PHA Wide	Administration	A3 1410		2,000	0				
PHA Wide	Fees and Costs	A9 1430		1,500	0				
OK087000001	Replace window units (used with 2009 ARRA funds)	C3 1460	12	29,397	15,990	15,990	15,990	100%	
OK087000001	Purchase Ranges	B-3 1460	24	3,253	0				
OK087000001	Replace garage door – senior	B3 1470	1	4,000	0				
	Purchase equip community kitchen: folding tables/trays	B3 1470	5		1,156	1,156	1,156	100%	
				46,681	46,681	46,681	46,681	100%	

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Part I: Summary					
PHA Name: Housing Authority of the City of Wister		Grant Type and Number Capital Fund Program Grant No: OK56P08750105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: 03/31/2010 <input checked="" type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations	4,700	41,757	41,757	41,757
3	1408 Management Improvements	2,000	2,000	2,000	2,000
4	1410 Administration	2,000	2,000	2,000	2,000
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	1,500	1,500	1,500	1,500
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	37,057	0	0	0
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	47,257	47,257	47,257	47,257
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Part II: Supporting Pages								
PHA Name: Housing Authority of the City of Wister			Grant Type and Number Capital Fund Program Grant No: OK56P08750105 Replacement Housing Factor Grant No:			Federal FY of Grant: 2005		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
PHA Wide	Operations	A3 1406		4,700	41,757	41,757	41,757	100%
PHA Wide	Management Training	A9 1408		2,000	2,000	2,000	2,000	100%
PHA Wide	Management Travel	A3 1410		2,000	2,000	2,000	2,000	100%
PHA Wide	Fees and Costs	A8 1430		1,500	1,500	1,500	1,500	100%
OK087000001	Replace windows in units	B3 1460	96	37,057	0	0	0	0
Total				47,257	47,257	47,257	47,257	

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